CHANGE REQUEST

SECTION I REQUESTER			
1. REQUESTER *(Last, First, MI)*:	2. DATE (MM/DD/YYYY):	3. ORG. CODE:	4. TELEPHONE NO.:

5. APPLICATION/WEB SITE AFFECTED:	6. TITLE OF CHANGE REQUEST:

7. EXPLANATION FOR CHANGE REQUEST:

8. RECOMMENDED ACTION:

9. JUSTIFICATION FOR CHANGE REQUEST:

10. PRIORITY LEVEL:

☐ EMERGENCY
(Work stoppage; critical deadline(s) in jeopardy; workaround nonexistent or unacceptable; and/or unplanned release is justified).

☐ HIGH
(Work can continue but severe impact on resources; supports high-priority agency initiative; and/or implementation within 6 months is justified).

☐ MEDIUM
(Work can continue but moderate/minimal impact on resources; and/or implementation within 12 months is justified).

☐ LOW
(No measurable impact on work or resources; nuisance problem; cosmetic change; and/or no specific due date).

11. USER COMMUNITY AFFECTED:

☐ Centerwide
☐ Users across multiple organizations
☐ Users within a single organization
☐ Small number of users (<15 users)

12. POLICY DRIVERS:

☐ Federal law
☐ Agency policy
☐ Center policy
☐ No lower policy driver

13. SAFETY IMPLICATIONS:

☐ Critical to safety of people or property
☐ Improves safety of people or property
☐ Not related

14. INCREASED PRODUCTIVITY (Annual):

☐ 10,000 man hours or more
☐ Between 1,000 and 9,999 man hours
☐ Between 100 and 999 man hours
☐ Less than 100 man hours

15. DESIRED IMPLEMENTATION DATE:

☐ Requested
☐ Required

(MM/DD/YYYY) _____

SECTION II ORGANIZATIONAL REPRESENTATIVE	
16. ORGANIZATIONAL REPRESENTATIVE APPROVAL:	17. DATE APPROVED (MM/DD/YYYY):

SECTION III   APPLICATION REQUIREMENTS WORKING GROUP

18. TYPE OF CHANGE REQUEST:

☐ Discrepancy
  ☐ Emergency
  ☐ Nonemergency

☐ Requirements Change
  ☐ Federal Law
  ☐ Agency Policy
  ☐ Center Policy
  ☐ Performance/Design
  ☐ Funtionality/User Interface Improvement

☐ Study/Analysis

19. LEVEL OF EFFORT:

☐ Small (less than 40 hours)

☐ Medium (40 to less than/equal to 80 hours)

☐ Large (80 to less than/equal to 160 hours)

☐ Extra Large (160 hours or more)

20. IMPACTS OTHER SYSTEMS:

☐ Yes (if checked, identify systems affected in block 21)

☐ No

21. IMPACTED SYSTEMS:

22. REMARKS:

23. DISPOSITION:

☐ Approved as written

☐ Approved with modifications (if checked, state reason in block 22)

☐ Disapproved (if checked, state reason in block 22)

☐ Hold (if checked, state reason in block 22)

☐ Withdrawn

24. APPLICATION REVIEW WORKING GROUP CHAIR APPROVAL:

25. DATE APPROVED (MM/DD/YYYY):